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## Digest of the Philadelphia College of Osteopathic Medicine (Summer 1987)

Philadelphia College of Osteopathic Medicine

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Today's interns  
step out on  
the osteopathic promise

# DIGEST

S U M M E R 1 9 8 7



*Sometimes it seems that OMCP*

*is taking a treadmill stress test.*

*How fast can we go without developing ischemia,*

*severe chest pain or just plain fatigue?*

*This edition of the Osteopathic Digest*

*shows that we are sweating and breathing hard*

*but still responding to the treadmill*

*that goes faster and faster.*

*That's a tribute to the whole OMCP community.*

*How will the osteopathic hospital adapt to competition*

*and an increasing trend to the development of regional hospital systems?*

*Can the osteopathic college compete*

*for the diminishing pool*

*of qualified applicants for medical school?*

*Can the osteopathic profession teach*

*and practice a distinct and effective health care*

*that warrants its continued separate existence?*

*These critical questions,*

*part of our year-long series,*

*"Imperatives for Success,"*

*are presented in this issue*

*for your thoughtful consideration.*

*J. Peter Tilley, DO*

*President*





Mecki McCarthy

## DIGEST

The Digest  
of Philadelphia College  
of Osteopathic Medicine

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<b>George Hylander, DO</b>	2
Professional Success and Personal Loyalty	
<b>The Classy '87s</b>	6
A Backward Glance at our Graduates' Future	
<b>Hospital Ins &amp; Outs</b>	12
The Fiscal Pressures are Fostering Change	
<b>On Campus</b>	16
<b>Joann Cozza, DO</b>	20
Recipient of the First PCOM Alumni Neurology Fellowship Abroad	
<b>Class Acts</b>	22
<b>In Memoriam</b>	24
<b>Calendar</b>	25







# George B. Hylander, DO, FACOR

## A Profile of Professional Success and Personal Loyalty

By Ralph Weltge



Paul Lloyd, D.O.

**E**arly in his private practice, George Hylander made an impulsive decision to buy his own X-ray machine. He reasoned, Why send patients out for films when I could do them myself, right here in my own office? "That's how naive I was back in the late 1930's," he recalls, "and I soon found out that I didn't know what on earth I was doing."

He took a second courageous step by boldly approaching Dr. Paul Lloyd, his former professor at PCO as the school was then named. He said, "Dr. Lloyd, I have a machine, I can't read the results, and I want to learn how because I like the work." Lloyd looked at him as if the request were absurd, but promised to think about it and did so for almost a year, or perhaps dismissed it. "I kept hounding Dr. Lloyd saying, 'I'll never let you down. Give me a chance. I'll do my best and I'll either get it or get out.' Finally, he turned to me and grumbled, 'OK, Dr. Hylander, when do you start?'"

A practice roadblock, a personal drive to succeed, and a hard-won relationship to a PCOM professor changed George Hylander's life and launched him on an outstanding, lifelong career in radiology in York, Pennsylvania.

### The Art Of Interpretation

"Interpretation is the art in radiological science," he says, "taking pictures is merely a matter of technique." Thirty five years of practicing the art enable Hylander to make it sound easy. Yet he is willing to grant that competence is the reward for years of frustration, apprenticeship and hard work. "At first you can't see for the looking," is the way he puts it.

The novice spent five pivotal years doing a preceptorship with Doctors Lloyd and Wheeler at PCOM, from the early war years to 1947 when Hylander became certified in roentgenology. He was the first preceptor ever accepted by the department, suggesting recognizable aptitude as well as his keen interest and dogged persistence. It was a round-the-clock, all residency program at the time, so Hylander had to work every morning or afternoon and all weekends while also carrying his private practice in Overbrook. Here, his eyes were opened and he began to see in new ways.

When asked to identify the lasting benefits of his preceptor years at PCOM, George Hylander gladly names several formative influences. One was the professional advantage of learning well the fine art of interpreting radiographs. "Doctors Lloyd and Wheeler were really good, two of the giants of the profession, making the PCOM radiology department one of the best in Philadelphia. Those men were smart," he recalls, "and I was determined to achieve their level of skill."

The other influence was personal, one's motivation for excellence regardless of obstacles or rewards. "Dr. Lloyd was tough on me. He could be demanding, irascible, and he kept me under a critical eye as his first preceptor," says Hylander. "They had this genius working impossible hours at an unliveable salary in an uninhabitable basement hovel on 48th Street. He was a totally dedicated teacher and radiologist, a model of commitment to all of us who trained under him."

He gives those years emotionally mixed reviews. Evidently, everyone who has ever associated with Dr. Lloyd has definite feelings about the man, one way or the other and often both ways at once. If you ask him, Hylander will regale you with stories either way. But the underlying theme of his recollections is always a mixture of gratitude and respect, even approaching the awe reserved for special mentors who have influenced our lives profoundly.

### Beginnings In York

At the end of his preceptorship, Hylander faced a choice among several attractive offers. One would have led to an academic career. "Dr. Lloyd hinted about offering me a position as assistant radiologist. I asked what he had in mind, and he said, 'We can start you at \$5,000 per year.' I replied, 'Dr. Lloyd, I'd love to continue working with you if I could only survive on that kind of money.' That's how dedicated he was."

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"Another opportunity arose in York, where some DOs had purchased the Westside Sanitarium, a 90-bed private hospital they knew nothing about running and part of which looked like a grain elevator," he says. "There was no roentgenology to speak of. They offered me ownership of the department because there was really nothing to offer, only a big headache." He and his wife Blanche liked the community very much, however, and he says, "It was an exciting challenge to build a new department of my own, to make something of myself and at the same time serve the profession."

The Hylanders chose to start from scratch. The move meant taking the classic step in launching a new practice—going deeply into debt. "I had to buy a diagnostic machine, a therapy machine, and all the equipment to support them," he recounts. "I hocked myself for \$35,000, a sum of money I had never seen in my life, with no assurance that the commitment was viable. I remembered Dr. Lloyd's warning: 'Look, they've only nine men up there and radiology grossed \$4,000 last year, hardly enough to buy solutions for your film.'"

It only began to improve when the DOs, now 10 with Hylander, organized to turn the situation around. They mounted a successful campaign to attract new DOs to the area and vowed to give the allopathic hospital strong competition. The doctors poured in their own funds to make the hospital grow. Significantly, they made a covenant to maintain the highest standards of performance and ethics. No incompetence would be tolerated and no unnecessary procedures would be done. Hylander credits the massive support given by the staff and board of the hospital at that time as the major motivating factor for the department's—and the hospital's success.

### **The Maturing Dream**

Of all that he has accomplished, George Hylander is most proud of the radiology department he built during his 29 years at Memorial Osteopathic Hospital of York. The institution blossomed and moved into its new, \$2 million 200-bed facility in 1964. "It was a fine place to work, and we had more certified doctors in the hospital than PCOM had at the time," Hylander wryly observed in friendly rivalry with his old alma mater.

A significant part of his pride is the mammographic clinic he developed. "We had up to 600 women coming in annually for mammography and we did it for cost, a big thing at that time," he admits. "I saw each one of them. We did a breast exam, a thermogram, and a mammogram for a total of \$15. Can you imagine that at today's costs?" The time and efforts contributed were indeed generous, and some of the interesting findings were published in the *AOA Journal*.

**H**ylander also did pioneering work in the radiological diagnosis of the ruptured spleen, a piece of original research that he published in the *AOA Journal*. "We were alongside Route 83 going north to Harrisburg and they hauled in accident cases presenting us with 15 ruptured spleens in a period of several years. We had them in surgery a few hours after the accident," he says, "and the radiological diagnosis prevented what might have been a dangerous delay."

The blossoming had come to full flower by the time of his retirement in 1976. The radiology department under his leadership had grown from one to five X-ray units with three full-time associates, three residents, and 16 technicians seeing 150 patients a day. From a small beginning in a small town, Hylander created a crack team of professionals who enjoyed area wide respect for their competence as osteopathic physicians and for the quality of their patient care. It is an enviable record now recognized by the college community as well.

### **Letterman, Honored Doctor**

Born in Philadelphia on the eve of World War I, George Hylander went on foot from his parent's home to classes at PCO's old campus on 48th Street. He entered as a premed student in 1931, taking 12 straight months compressing two years of science into one, and graduated from the college with the 91-member class of 1936.

"I was an athlete during medical school," he volunteers, "a member of the baseball, basketball, track and swimming teams. I earned a letter in each sport, even batted 550 one year on the base-



ball team. How about that!" Exceptional, we'd say, which probably also explains his low golf handicap over the years.

The high energy he put into medical practice and service to professional organizations merited the numerous other trophies he has collected along the way. Hylander commuted from York to give guest lectures at PCOM for seven years, and was Chief of Staff at Memorial Osteopathic Hospital of York for three years. Active in the American College of Radiology since the mid-30's, he served as its president in 1956-57, and was elected president of the American Osteopathic Radiological Society of Pennsylvania for two terms. He was elected a Fellow of the American Osteopathic College of Radiology, and a Trener Lecturer. Four years of work were given to set up the modern AOA program of inspection and accreditation of hospital teaching programs for interns and residents.

**G**eorge and Blanche Hylander recently celebrated their golden wedding anniversary, marking another covenant loyally kept. Their fine home, situated on a point overlooking the tidewaters along the eastern shore of the Chesapeake, is graced by a personal collection that stuns the visitor having an appreciation for objets d'art. For decades the Hylanders have been acquiring rare pieces of antique furniture, clocks, pewter and brass that reveal their eye for beauty and their love of quality craftsmanship.

#### **The Hylander Chair**

A successful medical career and good health have enabled the Hylanders to enjoy travel and personal interests at a leisurely pace. It is a time that leans toward reminiscing as well. He naturally recalls professional achievements, also those colleagues and communities whose contributions to his life can be measured more accurately and appreciated more fully with the passage of time.

Looking back gratefully, George Hylander remembers Dr. Lloyd, those years with the PCOM department of radiology, and their continuing relationship. "I owe practically my whole career to him, to his help, understanding, kindness and a lot more. I'll be forever grateful to him," pledges Hylander. "A top radiologist and a true friend, this man never held back and he never let me down."

Looking forward generously, the Hylanders plan to found *The George B. and Blanche A. Hylander Chair of Radiology* at the college. This professorship will establish a continuing testimony to both excellence in education and the unique osteopathic contribution to the radiological sciences.

The college is deeply gratified by the Hylanders' planned gift and their loyalty to the college. By virtue of *The Hylander Chair*, the college sincerely hopes that future generations of medical students will experience teaching equally as dedicated as that which inspired its founding.

#### **The Human Touch**

A warm and friendly man, George Hylander has a ready wit. He can laugh heartily at our human foibles including his own, or at the medical practice world he entered in 1938 that seems so quaint in the light of today. "It was great fun," he sums up. "I wouldn't trade my experience for all the tea in China because it gave me a grand sense of accomplishing things useful to society and important for people."

He has a list of things he *doesn't* miss one iota—like being told that DOs should move to the back of the 1940 medical bus; heavy hospital politics and meetings that go until midnight but still don't resolve the problem; sloppy interns in beards and jeans; or his Corvette, whose brakes couldn't be fixed by any mechanic in three states and he tried them all.

He'll tell you one thing he really *does* miss. One thing, that is, in addition to the old days, a nickel ice cream cone, and "the era when you got some decent time from your local internist."

Nostalgically, George Hylander says, "There are no DOs down here on the shore, and I sure wish we had one. Osteopathic physicians used to lay hands on people, to examine them minutely. It was *the human touch*, and I miss it greatly."

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# The Classy '87s

Story and photos by Harry Gehlert

"A Class is Born" was the cover story in the Summer, 1983 issue of *The Digest*. It described some of the 213 men and women who would graduate from PCOM in June, 1987. A page introduced two students who had received the Dr. Ethel D. Allen Memorial Scholarships. Another article focused on the aspirations of Jane and Suzanne Huffnagle, twins who had decided to become DOs after working as medical technologists in the microbiology laboratory at Geisinger Medical Center in Danville, Pa. A series of photos and captions described other new aspirants to the DO degree. Among them were Larry and Lisa Finkelstein, son and daughter of PCOM's urology chairman, Leonard Finkelstein.

By May 31 this year, 199 of the original 213 class members had stayed the course and received their degrees. Five who were featured in the *Digest* of Summer 1983 are met again in these pages, after having been through the most demanding learning experience of their lives. All have profited from it—all have been changed by it. Somehow they seem leaner, tougher, more sagacious. Most have recognized the importance of personal and political relationships to the progress of their careers. For some, applications for residencies and internships are still pending. Their answers to questions are direct, always thoughtful—sometimes cautious. No one wants to appear in print with an opinion by which they may be perceived as less than a perfect candidate for a desired residency.

New opportunities have opened for most graduates. For others, early ideals have been put aside in deference to some ways the

world has changed during their four years in medical school.

When Jane Huffnagle entered PCOM she wanted to be an obstetrician. Now, noting the increasing number of lawsuits that involve obstetricians, she's decided to work in anesthesiology. Although no practitioner in any branch of medicine is immune from attack, Jane has decided that the pleasure she would find in practicing obstetrics isn't worth rendering herself vulnerable to the legal risks. "It's a shame," she says. "I really wanted to go into O.B. It's not that I'm looking for an easier job now—just choosing a less hazardous one." Suzanne Huffnagle's goals remain unchanged. She will continue to pursue her interest in emergency medicine.

Some of the cost of becoming a DO has included the sacrifice of proficiency in other skills. Both Huffnagles are musicians. Dr. Jane Huffnagle's instrument is the violin, Dr. Suzanne Huffnagle's is the viola. A decline in the quality of their playing has been a tax on the price they paid for four years at PCOM. Medical studies, all-encompassing, left little time or money for the pursuit of interests that didn't contribute to their degrees.

Deciding to pursue a medical degree in 1983 required the courage to commit future revenue of over \$90,000. That's how much is owed by the 1987 graduate not fortunate enough to have been financed by others. Willingness to assume debts of that size suggests that the DO degree is highly prized.

Asked for this article why they wanted to be physicians, most of the graduates interviewed





*The 213 original members of the class of '87 arrived at PCOM on August 25, 1983. Eighty percent were from Pennsylvania—20 percent from 11 other states. The class boasted the largest percentage of women since 1900, when a woman made up half the class of two. The average age of the new class was 24. Eleven were veterans. Twenty-seven were married. Among the 199 students who completed the work were Lisa and Larry Finkelstein, pictured here, children of Urologist*

## *The Class of 1987*



*Leonard Finkelstein. On the following pages you will meet six other DOs who were representative of PCOM's newest graduates. If you have somehow misplaced your copy of the Summer, 1983 Digest, reprinted photos from that issue will recall how these new DOs looked back when their degrees were remote—when the mountain of study and work had yet to be climbed. As new portraits demonstrate, they not only survived the 4-year trial of their stamina and perserverance, but flourished.*



said their desire had endured for as long as they remember. They planned early to acquire the appropriate premedical degrees. However, Beth Fisher was not one of the early planners. She decided to become a doctor later in life, and came to medicine from other disciplines. Having been a philosophy major, Beth had to adjust to a scholastic regimen that, she believes, deals more with techniques than with ideas. "In medical school," she observes, "we were trained, not educated." Most students concede that there is little time for reading much of anything but technical material.

In the effort to assimilate the vast quantities of information conveyed to a student doctor, however, all previous learning is of value. Beth says she would like to have had time to indulge her interest in the liberal arts and to participate in discussion groups as she did before coming to PCOM. But she credits her liberal education with sharpening her thinking processes, and keeping her mind keen for the rigors of test taking and essay writing.

Joyce Lea and Beth Fisher received \$5000 Ethel D. Allen Memorial Scholarships. They provided both with a start. But each relied heavily on her family and on loans to carry her through to graduation.

Neither Beth Fisher nor Joyce Lea, like the rest of their similarly burdened classmates, know how or when that money will be repaid. For the moment, faced with debt so large that it seems almost unreal, they are most concerned with completing the next step in the never-ending effort to accumulate knowledge and experience. Both will continue with residencies in family practice—Dr. Fisher in Allentown, Dr. Lea in Long Island.

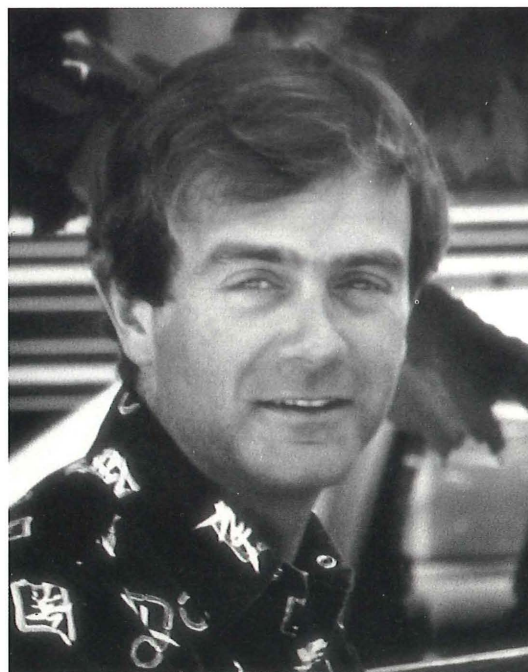
The future paths of the Finkelsteins, Larry and Lisa, will diverge more sharply than they have ever done before for a son and daughter in this closely knit family. As the children of PCOM's urology chairman, they were responsible to a parent who was not only intensely interested in their progress, but who could—and often did—evaluate it. Thus, according to Lisa and Larry, pressures for them evolved more from goals than from concerns about the future repayment of debt.



*Dr. Joyce Lea is off to a 3-year family practice residency in Long Island, N.Y.*



*Dr. Les Folio, the class of '87's renaissance man: Inventor, traveler, innovator—he plans to pair his DO degree with a degree in engineering.*







*Dr. Beth Fisher, recipient with Joyce Lea of a Dr. Ethel D. Allen Memorial Scholarship, chose to practice family medicine. The 1983 Digest photo, above, shows them with Carol Fox, director of admissions and student affairs.*



*Dr. Gwendolyn Poles is satisfied that her choice of osteopathic medical training was the right one. "I've been given additional tools and a better philosophy."*



*The  
Class  
of  
1987*

Dr. Larry Finkelstein will remain at PCOM to begin his hospital internship. Dr. Lisa Finkelstein is off to an internship at Botsford General Hospital, in Michigan. In October she plans to marry another PCOM graduate serving his residency at the same hospital. The Finkelstein family will continue to be represented at PCOM by brother Robert, of the class of '89.

Les Folio, like a traveler in an exotic land, roamed through medical school enjoying all the delights. In return, he left something new of his own in almost every rotation. Before joining the class of '87, Les worked at PCOM as a radiology technologist, left to acquire a B.S. in Radiologic Technology from Widener University, and returned to PCOM to work for his DO. His varied interests range from celestial navigation through radiology to creative invention. Some of his inventions meet needs he has encountered in his medical studies. One is a curved plastic blade he calls "Cast-Away." It is inserted beneath a cast to protect the skin from the risk of abrasion and to allay fear when the cast is removed with a bone saw. His latest invention, designed to fill a need of skiers, is a combination of earmuffs and sunglasses.

Folio's contributions to PCOM include a research project that led to a technique for alleviating TMJ pain described in the previous issue of Digest.

Folio asked for distant rotations and got one in Alaska. There he acquired some medical experience he says he wouldn't have gotten any other way. Curing sealfinger, for example. You can get it when handling seal meat with a cut on your finger. It's cured with tetracycline. Or treating frostbite—not entirely unknown in Philadelphia's temperate climate, but not often seen near the 38th parallel. Folio's interests are as intense as they are diverse, and when asked how he responded to the workload at PCOM replied: "Any good school will give you more than it has to. The knowledge is here. A student can get most of it if he wants to do extra studying." Dr. Folio might do just that. Next on his varied agenda is training for a pilot's license—then the pursuit of an engineering degree.



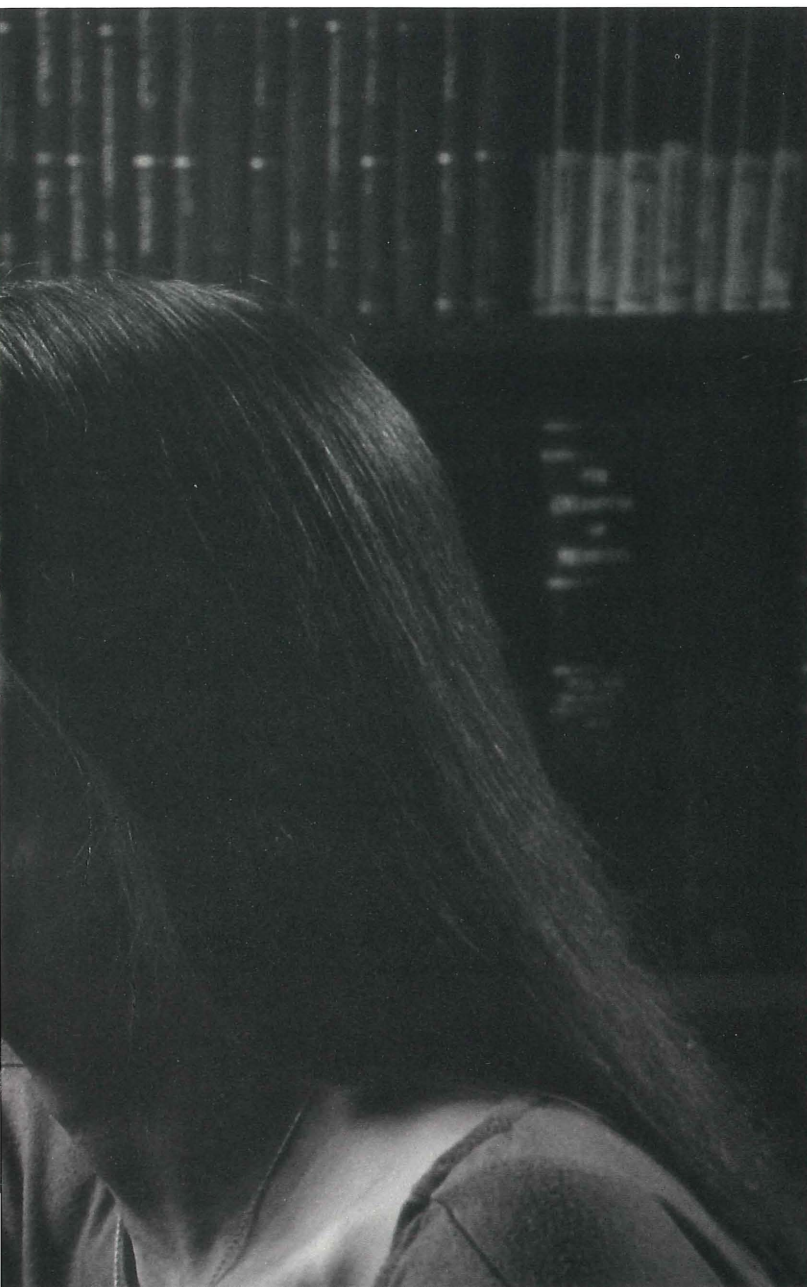
Among the graduates who said they had wanted to be physicians since childhood was Gwendolyn Poles. By the time she reached college age that ambition had faded, and she graduated from Franklin and Marshall College, in Lancaster, Pennsylvania, with a degree in anthropology. Gwendolyn took time out after college to think again about her early ambition to become a physician. That process absorbed two more years before she decided to apply at PCOM. Driving past the school regularly, she was reminded of that dream by the large PCOM sign facing City Avenue. One day she stopped, looked into the school, and was attracted by the DO tradition. She is satisfied that her decision to pursue the osteopathic way was correct. "I've been given additional tools and a better philosophy," she declares. A chance to sharpen those tools and apply that philosophy will come with her three-year residency in internal medicine at Bryn Mawr Hospital, in Pennsylvania. Dr. Poles holds deep religious convictions, and upon completion of her residency intends to share in the work of a medical mission.

The satisfaction felt by the graduates upon finishing was all the more profound for having experienced in their first or second year what some called "the lowest time in my life." Fears of having gotten in over their heads seemed to peak then, and early enthusiasm sometimes floated off in the wake of extraordinary physical and mental exertions. One graduate describes second year final examinations as a time of "pulling overnights, sleeping on the school floor, feeling grungy and eating out of vending machines."

## *The Class of 1987*







*Growing apart together. The Drs. Huffnagle, Suzanne (left) and twin sister, Jane, have made good on their 1983 promise to use the PCOM experience to reinforce their individuality. Suzanne will pursue her interest in emergency medicine, Jane will work in anesthesiology. Both will renew the musical studies they sacrificed while acquiring DOs.*

Another, asked if she would do it over again replied "I probably would, but I'm glad I didn't know how much work it would be when I started. It's more than you would ever imagine." Some who had not studied related material before entering PCOM judged their first semester the toughest. For students to whom subjects like anatomy and biochemistry were unexplored, this first exposure to the PCOM regimen was especially intimidating. Another difficulty, sometimes complained about in colorful terms, was having to face second-year finals that followed immediately upon completion of courses, permitting no intervening period of study.

With the arduous challenges of four years of medical school now behind them, each of the newly minted DOs can find something moving, profound, and unique in his or her experience—psychic rewards that help compensate for the exhausting expenditure of energy and treasure. For one it was being able to make a difference in the lives of impoverished patients met on a distant rotation. For another it was the gaining of insights into some of the social problems in medicine. "I had always thought most inner city girls get pregnant because they lack information about birth control," said one graduate whose rotations took her to hard core centers of urban privation. "I discovered that it's not. It's because the lives of many are empty, and babies fill that void."

Having traveled an arduous journey and arrived at a cherished destination is enormously gratifying for every new DO. It is equally so for everyone who helped them—as it is for PCOM.



# Hospital Ins & Outs

## The Fiscal Pressures Are Fostering Change

by Ralph Weltge  
Photographed by Mecki McCarthy

**O**steopathic, the hospital of PCOM, is walking a fine financial line these days. Walter Brand, its executive director, says, "Believe it or not, all we need are *three more admissions every weekday*. That's how close we are to turning the bottom line around during fiscal '88, and I'm convinced that it can be done."

As a player in the Greater Philadelphia health care sweepstakes, Osteopathic is working hard to improve its productivity and profitability while carrying out its mission of osteopathic medical education. It's a job that everyone—physicians, college and hospital administration, nursing staff and technical support departments are concentrating on.

"I don't bring most patients into the hospital," Brand continues, "the physicians do. We need enthusiasm and help from both our full-time and private physicians. I say to them—look, this is really *your* shop. Let's work together to make Osteopathic a financial success. Increase your admissions modestly, and the hospital will do its part by keeping costs in line while delivering services."

### The Admission Ticket

"If the hospital is successful, everybody is a winner," says Theodore Mauer, DO, newly elected chairman of the professional staff. "Proportionately as a staff, we're not getting all the work we could and should be receiving as an osteopathic teaching institution in the region. Each department has to examine itself and find creative ways to increase patient volume."

For example, Mauer thinks that referral patterns are crucial and ought to be analyzed, the reasons for past losses determined and corrected, and new referring physicians actively cultivated. "We preach a gospel of offering fine physicians and good patient care at Osteopathic," he says. "Referrals are the life blood of the hospital and general practice is where patients enter the system. Our intent is to show DOs in the Delaware Valley that they can support Osteopathic as well as allopathic institutions."

There are also lessons to learn and dollars to earn from the burgeoning prepaid plans. "HMOs are efficiency based systems," says Joseph Flamini, associate hospital administrator. "We've worked out practice arrangements with four of them on the way to winning more of that business. The general practice department now has the second largest HMO PA enrollment of any practice in the state, and they use our hospital resources for that care." Increasing the

outpatient load is another sector of revenue growth, and the hospital has named it a second target for expansion.

### Cranking Down Costs

No one can explain why admissions did not rise again after the winter holidays as they had in previous years. "I live by numbers," says Brand, "but it's been impossible to isolate the causes for our census decline, even though we keep trying. When the drop became evident, we immediately began to ratchet down our variable costs over which we have some control. The fixed costs, however, continue whether there are 50 or 150 patients in-house."

Flamini says that the four largest costs in the operation of the hospital are: (1) the salaries of personnel, accounting for about 65 percent of the budget; (2) pharmaceuticals and supplies; (3) liability insurance for house staff and employees; and (4) capital for equipment purchases or leases and depreciation funding. The administration was able to reduce variable costs heroically, but fixed costs conspired with the lowered census to produce the fiscal '87 deficit anyway.

Cost containment at every point continues to be the policy of the hospital administration, even though the obvious and easy savings have already been taken. A portion of nursing is provided by agency or pool nurses on demand; computerization enables people to work more efficiently; contracts with new providers are bargained closely; elective procedures are not allowed unless there is a reasonable chance of reimbursement; all renovations are done by OMCP's own talented maintenance staff; and outside management services have been enlisted in the containment effort.

On the professional staff side, Mauer says, "The departments have got to take DRGs more seriously and learn how their practice habits either meet them or throw the hospital for a loss. It's a whole new ball game. When we get loss reports, we have to find out why, and then make changes unless the case is an unavoidable loss." He pledges to come down hard on any wasteful usage of hospital services and weigh the need to end tests done primarily for educational purposes. "Cost containment and higher productivity are the major challenges I face during my term as professional staff chairman."

### A Reason For Being

The primary purpose of the hospital is to serve as a laboratory for the education of osteopathic physicians, and the fine patient care given serves that end as well. The training function was the driving force behind the



creation of the hospital in the first place, and therefore determines its adaptive strategies during an era of higher competition, lower census, and tighter reimbursements from third party payors.

Flamini characterizes the teaching function as a burden and a benefit to the hospital. "With 100 house staff and maybe another 100 students rotating through the units, there are additional costs that other community hospitals do not carry," he notes. "On the other hand, the college link gives the hospital professional breadth and depth unavailable to hospitals of comparable size, and also some additional reimbursement. But payments for medical education may be tightened up further."

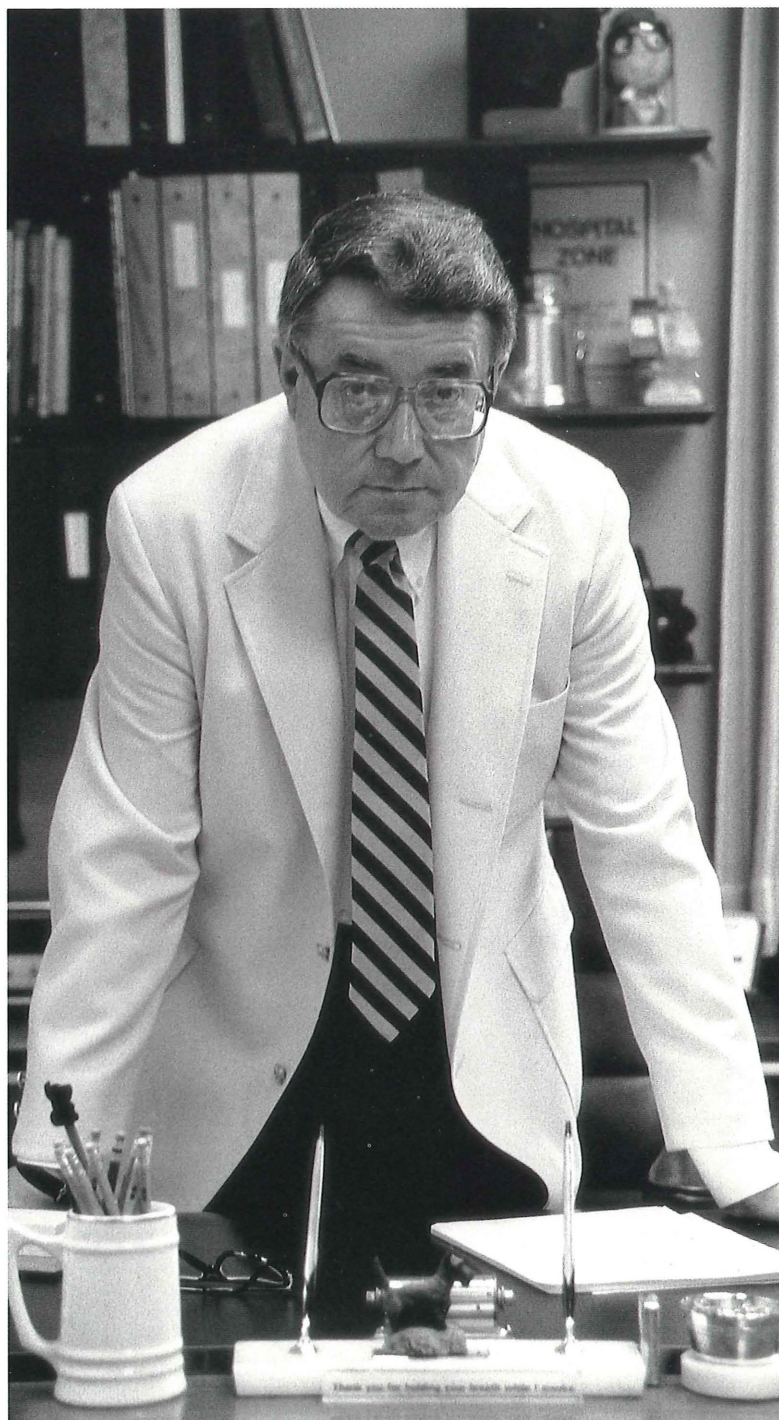
Thus, the hospital administration faces two serious and interrelated demands at this juncture. One requirement is to become financially productive again rather than a growing deficit operation in the OMCP budget process. The other is the challenge to remain educationally productive in a time when the college curriculum is changing, given the new realities in medicine itself and the health care delivery system today. Walter Brand has some imaginative ideas about meeting both of those demands down the road.

#### New Joint Ventures

"We are constantly on the lookout for new sources of business that will generate revenues from services not now being provided," says Brand. "Any new service added must meet two important criteria—it must offer a teaching mode for the medical students and show reasonable prospects for increasing our revenues." He considers lean size to be an advantage since the hospital can move more nimbly into new relationships with other actors in the health care delivery system.

Brand offers the *SurgiCenter* as an example of an in-house joint venture between the hospital and staff that has taught the hospital a lot. "As reimbursement changes and the thrust is to perform more procedures on an outpatient basis, adjusting our service organization to meet those pressures is an obvious necessity," he observes. Hopefully, the good experience with the *SurgiCenter* will predispose the staff to embrace enthusiastically the next joint venture the hospital may propose.

An upgraded treatment program and an aggressive marketing plan will back the newly refurbished mental health unit. The hospital is venturing into partnership with *CompCare*, a nationwide provider of behavioral medicine services, that may be a new model of marketing relation-



Walter R. Brand, Executive Director





Theodore Mauer, DO, Chairman, Professional Staff

ships. The 18-bed therapy program is tailored for a higher functioning patient population, offered to large corporations with employee assistance programs and DOs in private practice who want their referrals to receive care equal to a private psychiatric hospital.

Selling services to other hospitals is already underway and probably will be expanded in the future. "Right now our hospital sells pharmacy and anesthesiology services to Franklin Maternity Center down City Avenue," says Brand. "We have increased our educational experience and reimbursement for interns and residents by contracting to provide services to other hospitals such as Frankford. We could also attract new business such as mammography, which is in high demand right now, if we shut down some beds and establish a diagnostic center."

#### Networking With Others

"Networking," as it is called, simply means entering cooperative exchange agreements for services with other institutions in the health care system. It relieves each of the partners from the financial burden of providing all medical services and technologies across the board even though some may be unprofitable. The arrangement is especially attractive for smaller hospitals like Osteopathic.

"For example," Brand says, "there are certain services at Osteopathic that are not financially profitable and probably never will be. Yet, there're required for the sake of full service medical education. We could enter a joint venture with another hospital that has a much higher census in that service and send our students there for the training. In return, the other hospital would turn off one of its services and send those patients here for treatment." The hospital would do it *there* rather than *here*. The economies involved in joint ventures would also allow Osteopathic to offer services it does not now have, such as cardiac catheterization and open heart surgery.

Networking could involve reconfiguration of the hospital in beneficial ways, easing its present isolation and the burden of complete self-sufficiency. By tying into larger health care systems that are financially more productive, the hospital would enjoy certain economies of scale in terms of medical services offered and the wider marketing of those services. Philadelphia is over-bedded, and each hospital is now competing intensely for patients. Networking, by contrast, is a cooperative approach offering mutual benefits rather than do or die rivalry in which the largest hospitals have the distinct advantage.

Geriatric care is another case in point. Brand is considering the possibility of providing some skilled nursing



beds in the hospital. Comprehensive outpatient care would require numerous expensive services like home health care, physical medicine and rehabilitation, a surgical component, and social services that Osteopathic alone cannot afford to offer. The full spectrum of geriatric care, however, could be created cooperatively with several other institutions, and one administration could orchestrate the decentralized services.

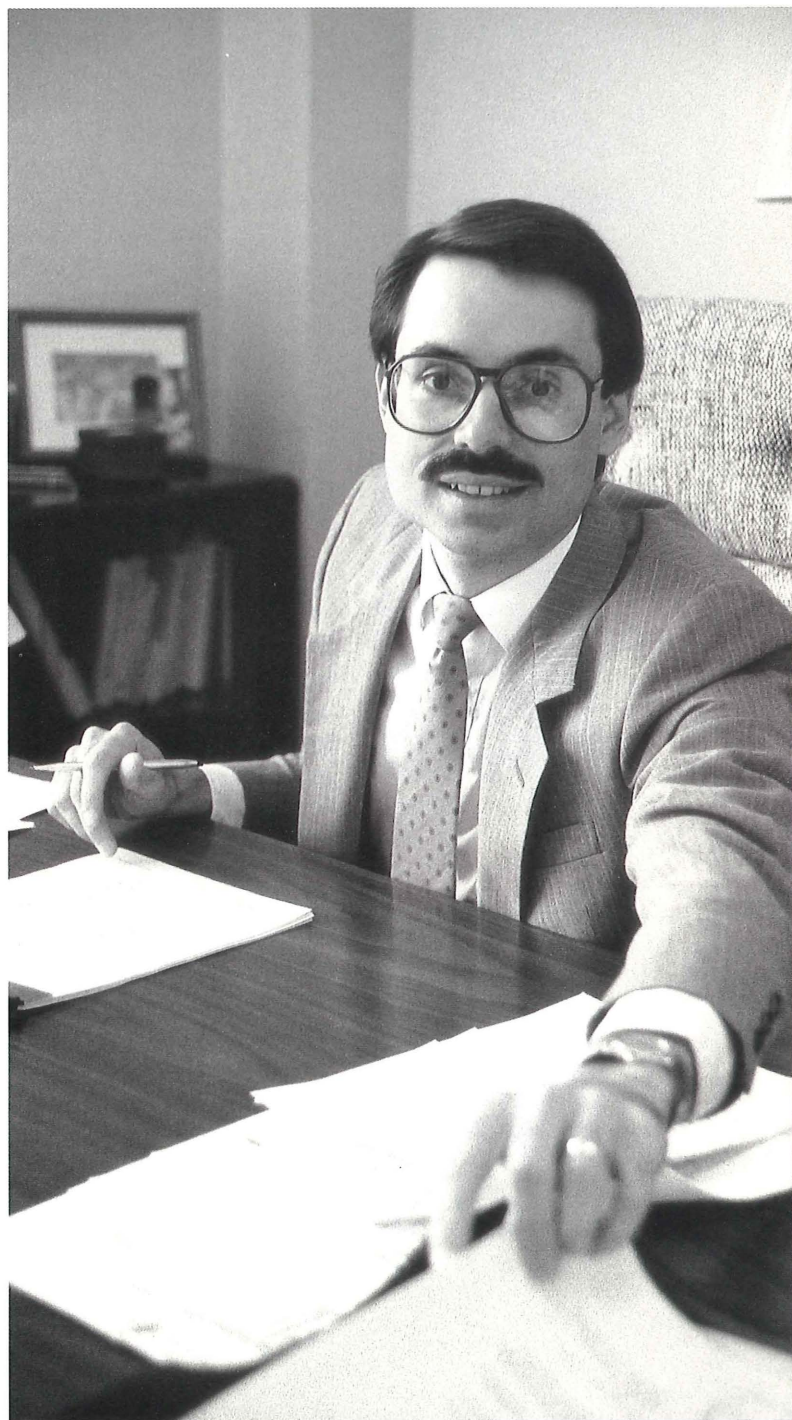
Asked if this means that Osteopathic may begin working with allopathic hospitals while developing new networks, Brand says, "I would indeed say so. Why not? Osteopathic hospitals emerged as a parallel system because DOs couldn't get appointments at MD hospitals in the old days. That's no longer the case, and, as a matter of fact, many PCOM graduates are not *here* because they're over *there*. So, I'll network with allopathic hospitals to gain economic and educational benefits."

#### **Freedoms & Constraints**

Listening to Walter Brand and Joseph Flamini discuss the present dilemmas and future prospects of the hospital is both sobering and encouraging. It involves business management lore that is not taught in medical school. One soon realizes that the issues of productivity and hospital viability are a complex, four-dimensional puzzle of interrelated problems, pressures, and people. There is no *easy* solution, or it would have been implemented already; and there is no *real* solution that will exclude basic changes being made.

Along the way, some quixotic elements come to light. For instance, the controller estimates that the hospital provided \$3 million in unreimbursed medical care last year, which just happens to be four times the amount of deficit experienced by the hospital. Those who hue and cry the loudest about escalating health care costs in this society shed the fewest tears over people who need care and have no means to pay for it.

During the fiscal year just beginning, the hospital must cut corners on costs, and work with professional staff members to turn the corner on increased admissions to the hospital. Both are necessary obligations. At the same time, curiously enough, the financial pressures may also offer increased freedom. The hospital may create new working relationships with other health care institutions and new admitting and referral sources in order to fulfill its original and continuing mandate for osteopathic medical education.



Joseph Flamini, Associate Administrator



## Alumni Generosity Annual Fund Tops \$400,000



Jonathan Kirk

"The Annual Fund has already passed the \$400,000 mark," declares **Albert D'Alonzo**, DO, '56, president of the Alumni Association. This is a 37 percent increase over the \$255,221 given last year, and fully triple the amount given the year when the fund was initiated. "I want to thank all the alumni who helped reach this unprecedented level of alumni support," says D'Alonzo, "especially those who increased their contributions to meet the trustees' challenge grant."

The first challenge grant in PCOM history was made by the OMCP Board of Trustees last fall. They pledged to match every \$2 increase in giving by each alumnus with a grant of \$1, up to a maximum of \$80,000. **Joseph A. Ackil**, DO, '67, then president of the Alumni Association, accepted the challenge and waged a vigorous campaign to meet it. The increase in the number of new contributors was also the largest in the history of the college, as was the percentage of givers from the younger classes. It was one "first" after another!

"This is also the first year that every single member of the Alumni Association Board made a pledge," says **Louis Martini**, DO, '58, chairman of the endowment committee. "The 100 percent is a strong vote of confidence. Since alumni across the country have been so generous, PCOM is now in an excellent position to ask corporations, founda-

tions, and individuals for philanthropic gifts."

## Vickers Foundation Award Established

PCOM received a very generous gift of \$24,000 from **Frieda O. Vickers**, DO, '39, and her husband **James G. Vickers**. The amount of \$16,000 was designated for the Annual Fund, and the amount of \$8,000 established an annual award. *The Frieda O. Vickers, DO, and James G. Vickers Foundation Award* will be given to the resident in general practice who is most outstanding in the performance of professional duties. At R&R Day this year, **Carol Robison**, DO, '85, was presented with a check by Dr. Frieda Vickers herself in recognition of her achievements.

## Student Phonathon Finale

A group of 41 students made a total of 1,244 calls to alumni over a four-day period in April, and alumni who remembered their student days contributed a total of \$42,400 to the PCOM revolving Student Loan Fund. The third Annual Student Phonathon produced 20 percent more capital for loans than last year, and showed a 103 percent growth since the first year of the campaign. The heavily indebted students who did the dialing thank those alumni who were touched by the appeal.

## PCOM Publications are Golden

There has been a steep flight of excellence in the quality of PCOM publications during the past two years, and you're holding an example of it right now. *Digest* won a gold medal from the Art Directors Club of Philadelphia, as did the *OMCP Annual Report*, and the *Cardiology Cookbook* won a silver medal. There were over 800 entries, only 70 awards of excellence were given, and PCOM walked away with all of the medical publication honors. The club is the Delaware Valley's most prestigious organization for designers and graphic artists, and the competition is tough. Our staff went up against the big advertising agencies, pharmaceutical firms, corporations, health care agencies, and design studios who can out-spend us many times over. Furthermore, seven PCOM publications won gold awards at Neo-Graphics 1987, the show where the printers compete with their best work. The honors go to **Jonathan Kirk**, manager of Creative Services, and his designers, and to **George Hatzfeld**, director of Communications for the college. As the Dutchess of Windsor might have said, "One can never be too rich, too slim, or too talented."



## Faculty in Focus

## New Professors Emeriti

**Galen S. Young, Sr., DO**, convened the annual meeting of The Survivors Club on June 21 at the Bala Country Club. Over 160 interns, residents, faculty, and staff along with their guests enjoyed dinner, dancing, and the rituals of farewell to those leaving for other posts. Dr. Young is the founding father and gracious host to this unique club that exists to celebrate the PCOM Hospital interns and residents. Now in its 42nd year, the club has grown considerably since the first dinner for six in 1945, and guests were invited to civilize the event as it grew larger and more boisterous. All who enjoyed the evening are grateful to Dr. Young and the officers of The Survivors Club, **Samuel Manfrey, DO**, **Albert D'Alonzo, DO**, and **Henry D'Alonzo, DO**.

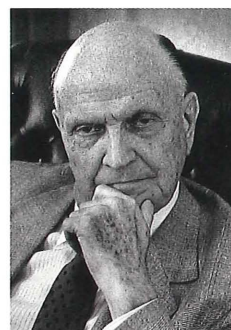
"Dr. Nick," as he is affectionately called, is a 1939 graduate of the Kirksville College of Osteopathic Medicine. He joined the PCOM faculty in 1947, and was named professor and chairman of the department of Osteopathic Principles & Practice in 1973, a position he held for 14 years. Also a private practitioner, a university team physician, and prolific author, he wrote the text, *Atlas of Osteopathic Manipulative Techniques*. In recognition of his outstanding teaching career, his contributions to professional academies and his community as well as 40 years of service to PCOM, the college has conferred on Nicholas S. Nicholas, MSc, DO, FAAO, the title of Professor Emeritus of Osteopathic Principles & Practice.

Dr. Guest graduated from PCOM in 1936, and was appointed to the faculty in 1939. He was named professor and chairman of the Department of Psychiatry in 1963, a position he held for 24 years. Dr. Guest was one of the organizers of the original Neurosensory Unit and a director of the Neurosensory Diagnostic Center. In recognition of his key leadership contributions to our profession, his receipt of an unusually large number of distinguished professional awards, his significant contributions to osteopathic medical literature and 48 years of service, the college has conferred upon George H. Guest, DO, FACN, the title of Professor Emeritus of Psychiatry.

Dr. Cipolla, whose creative teaching style made his classes unforgettable experiences, took a classic osteopathic approach in teaching anatomy. He graduated from PCOM in 1946 and became a member of the departments of Osteopathic Medicine and Osteopathic Principles and Practice. Dr. Cipolla joined the Department of Anatomy in 1967 and became chairman in 1973, a position he held for 14 years. In recognition of his many years of creative teaching, his commitment to the education of osteopathic physician, his curatorship of the Cathie Anatomy Museum and 41 years of service, the college has conferred on Vincent T. Cipolla, DO, the title of Professor Emeritus of Anatomy.



Nicholas S. Nicholas, DO



George H. Guest, DO



Vincent T. Cipolla, DO



Survivors Club



## New Appointments



*Herbert B. Boulden,  
CPA, FHFMA*



*Robert G. Cuzzolino, MEd.*



*Tage N. Kvist, PhD*

Appointed vice president for corporate finance and treasurer, Herbert B. Boulden, CPA, FHFMA, will direct all the financial activities of the OMCP Foundation, the holding company, and its five subsidiaries. Mr. Boulden comes to Osteopathic from Pennsylvania Hospital where he served for 18 years, most recently as vice president/controller.

Named as the new assistant dean for educational resources, Robert G. Cuzzolino, MEd., will be responsible for supervision and development of continuing medical education programs, institutional research, faculty enrichment, and college information programs. He has been assistant director of admissions and student affairs at PCOM since 1978.

Tage N. Kvist, PhD, has been appointed professor and chairman of the Department of Anatomy following the retirement of his colleague, Vincent T. Cipolla, DO. Dr. Kvist has 11 years of experience teaching in the department, first as assistant professor and then as associate professor since 1980. He also serves as assistant dean for basic sciences at the college.

Following first in his father's footsteps, Alexander S. Nicholas, DO, will now also occupy his father's chair at the college. Dr. Nicholas was appointed professor and chair-

man of the Department of Osteopathic Principles and Practice effective July 1. A 1975 PCOM graduate, he served his internship at the college and joined the faculty in 1976, a year later being appointed assistant professor.

Appointed vice president for corporate planning, Alan Zuckerman, MHA, will oversee program planning, joint ventures, demographic and feasibility studies, service need assessments, and site selection and construction requirements. He comes to PCOM after three years at ECRI, a health care consulting firm, and was previously with Amherst Associates.

PCOM is proud to announce that **Galen S. Young, Sr.**, DO, Professor of Emeritus of Surgery, was elected a fellow of the College of Physicians and Surgeons of Philadelphia in May. Dr. Young has been affiliated with PCOM for over 50 years.

## Professional Staff Officers

The members of professional staff have elected the physicians who will lead them during the 1987-88 year. Those serving are: **Theodore P. Mauer**, DO, chairman; **William Gilhool**, DO, vice chairman; **John McPhilemy**, DO, secretary; **Steven Parrillo**, DO, treasurer; and **Jerome Sulman**, DO, sergeant-at-arms.

(Personals, So To Speak) **Emanuel Fliegelman**, DO, was inducted into the Order of the Golden Hawk by St. Joseph's University at its commencement ceremonies this year. This unique honor is reserved for alumni celebrating the 50th anniversary of their graduation from the university. Dr. Fliegelman lectured at the recent POMA convention and also in Detroit.

**Jeffrey S. Freeman**, DO, chairman of the Division of Endocrinology/Metabolism, has been appointed to the subcommittee on metabolic diseases of the POMA and has been renominated to the board of examiners for the endocrinology division of the American College of Osteopathic Internists.

**R. Michael Gallagher**, DO, clinical associate professor of general practice, recently received a grant from Abbott Laboratories to investigate the efficacy and safety of a TENS-like pain suppression unit, and was elected a member of



the board of directors of the National Headache Foundation.

**Pamela Hornaman, DO**, PCOM's chairman of the division of geriatrics, has been selected as one of only eight physicians nationwide to participate in the National Institute of Health policies and procedures process dealing with geriatric residency programs. She will also be providing residents of Overmont House, a retirement center on campus, with both routine and emergency care in the new physician's office recently opened there.

**President J. Peter Tilley, DO**, presented Osteopathic's 1987 *Community Physician of the Year* award to **Leonard W. Johnson, DO**, '64, of West Philadelphia who is a member of the professional staff. Dr. Johnson has faithfully served the community where he lives for more than 30 years, and his Spruce Street Medical Center, with 14 health care professionals on staff, has been a beacon of family medicine for all. The award was made at the annual Spruce Street Community Health Fair that Dr. Johnson founded in 1979.

**John L. Johnston, DO**, Clinical associate professor of surgery at PCOM, was appointed to the Pennsylvania Board of Osteopathic Medicine. He is

chairman of the Department of Surgery at Clarion Osteopathic Community Hospital.

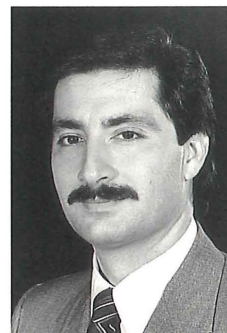
**Theodore P. Mauer, DO**, chairman of the Department of Otorhinolaryngology/Oro-Facial Plastic Surgery, was re-elected to the board of governors of the Osteopathic College of Ophthalmology/Otorhinolaryngology, and also elected secretary-treasurer of the organization. The Philadelphia Laryngological Society elected Mauer as a senior member-at-large of its executive committee.

**Paul S. Zeitz, PCOM** class of 1988 and national president of the Student Osteopathic Medical Association, attended a world conference on "Social Well Being, Health and Peace" in Moscow where 53 countries were represented. He will tell about it at the SOMA and AOA national meetings in Orlando, FL, early in October, or at lunch with you on campus.

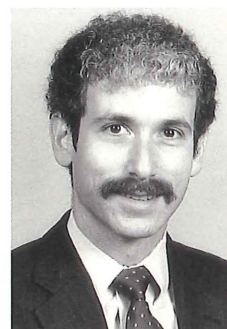
*Discover Our Difference* is the theme line for Osteopathic's new outdoor advertising campaign in the Delaware Valley. Eight billboards around the city began carrying the promotion for our physician referral service in mid-July, and the ad will appear at over 20 locations through the end of September. One billboard near campus will even carry the message until December.

## Bridge Over the River Delaware

Over 450 runners sweated their way to the finish line of the third annual Osteopathic 10K Bridge Run sponsored by PCOM. The winner will go to Disney World with the spectator of his choice, and the \$9,000 raised will go to the Delaware Valley Chapter of the National Multiple Sclerosis Society. The money will support research on the most common neurological disease of young adulthood that has no known cause, cure, or prevention. The closing ceremonies at Independence Mall were presided over by Larry Kane, WCAU-TV anchorman and a member of the MSS board. Thanks to all the folks at Osteopathic who worked hard to make the 10K Bridge Run a success this year.



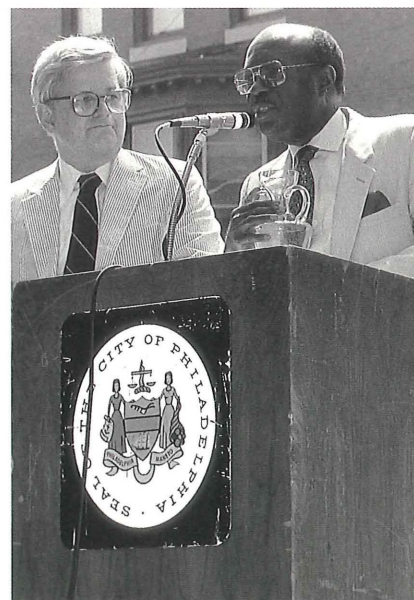
*Alexander S. Nicholas, DO*



*Alan Zuckerman, MHA*

*J. Peter Tilley, DO*

*Leonard W. Johnson, DO*





# Cozza Receives the First PCOM Alumni Neurology Fellowship Abroad

By Ralph Weltge

**J**oann Cozza, DO, becomes excited when recounting the surprises in her life. Her joy really soars as she names the string of *firsts* in her young career. She is the eldest of four daughters, the first member of her family to enter college, to work for a university, and even graduate from medical school with honors.

It seems only fitting that Cozza should receive the initial *Alumni Neurology Fellowship Abroad*. Being chosen was not only merited, but also made her the first family member to visit the European relatives since her grandfather emigrated to Philadelphia from the small Italian village of Aglioni, located in the Abruzzi region.

## Let Me Out!

"I arrived in Milan scared," she says, "because I only had taken a crash course in the language while I was studying for national boards and involved with difficult rotations. The first night I'm thinking, what are you going to do, Joann, sit here in your room in fear? No....let me out! So I caught a cab and somehow communicated that I wanted to go to the heart of Milan, and the driver dropped me near *Piazza del Duomo*. Wandering around trying to find a restaurant address pulled from a guide book, I met a university student who spoke some English, and we became friends."

That kind of initiative and spunk also served her well in professional work. Cozza went to the *Istituto Neurologico*



*C. Besta*. As part of a large medical complex, the institute specializes in neurological disease treatment and research under its director, Professor Renato Boeri. "I really learned a tremendous amount," she observes. "I thought the medicine was *prima* and the people brilliant."

**H**er principal mentor was Dr. Mario Savoiardo, who she characterizes as an excellent instructor and one of the leading neuroradiologists in Italy today. "He did his residency in Boston and is fully bilingual," she says, "a big help in my learning as much medicine as possible. Dr. Frederica Dworzak and others were also generous in facilitating communication."

On each service daily rounds are conducted, but the actual patient examinations are done in a private room. The patient disrobes completely in a culture less prudish than our own. "I saw some of the most thorough exams ever," she recalls. "Head to toe, and they incorporate some osteopathic principles like a really fine musculoskeletal examination. Some of the diseases were severe enough to deform the body grossly."

## Diagnosis, Please

All the other senses go on ready alert when information is not entering the ear. "Since I didn't know the language that well, I felt I had suddenly become deaf, that's the best way to describe it," she says. "I had to search for clues in other ways, and also rely on two years of neurophysiology research and two elective rotations in neurology. It was a real test. Before discussing the case, the physicians would turn to me and say, 'Well, Joann, what do you think this patient has?'"

"Sometimes I was right," she proudly exclaims. "Remember, some were complicated diseases I had never seen, only read about. I didn't get as much hands-on experience as I'm used to here, but I learned how to do a thorough neurology exam through observation."



**O**ne of the advantages of working in a specialty institute was her confrontation with 30 different neurological diseases. For the first time, she saw three Syringomyelia cases and each had presented in a different way. One young woman had been diagnosed earlier as having Scoliosis deemed idiopathic in origin. Cozza



learned that Syringomyelia may present itself incognito as Scoliosis. That became one of her illustrations when she reported back to the Alumni Board and was asked, "What did you learn osteopathically?"

With each of the Syringomyelia cases, the physician in charge translated the history and then went over the various radiographic films with her before bringing the patient in for examination. "The cavitation shows up fantastically on MRI," she notes, "while Computerized Tomograms and Myelograms sometimes miss it. Correlating the various neurologic diseases with the radiographs really heightened my interest in neuroradiology."

**Everything I Wanted**

"I made sure I saw everything medically I wanted to see, and learned everything I wanted to learn," she says. The institute made it possible by rotating her through the pediatric, adult, movement disorder, and neuromuscular disease departments as well as neuroradiology. This gave her valuable exposure to procedures such as muscle biopsies, diseases like Myasthenia Gravis and Ramsay Hunt Syndrome, and also took her to Siena with staff attending a conference on pediatric congenital myopathies.

The new fellowship is awarded to a fourth year student with strong interest in neurology. Cozza fits this profile well as she plans to do a pediatrics residency and pursue a career in child neurology. She graduated in the top

five percent of her class and also received the 1987 Alumni Association award for high caliber performance of professional duties in the hospital and out-patient services.

The college cherishes the support of the Alumni Association and is grateful for the founding of this new fellowship program. The generous contributions of many alumni make possible such unique educational opportunities of-



ferred to outstanding students like Joann Cozza, whose fellowship was co-sponsored by the Dean's Office.

**B**ehind a good idea there usually can be found an imaginative and loyal member of the college community. In this instance it is A. Kenneth Ciongoli, DO, '68, who is a member of the Alumni Association Board. A practicing neurologist in Burlington, VT, Dr. Ciongoli is the liaison neurologist for sending American medical students to Italy and was integral in organizing this fellowship abroad.

Now doing her internship at Metropolitan Hospital, Central Division, Cozza reminisces, "I did my best to explain to

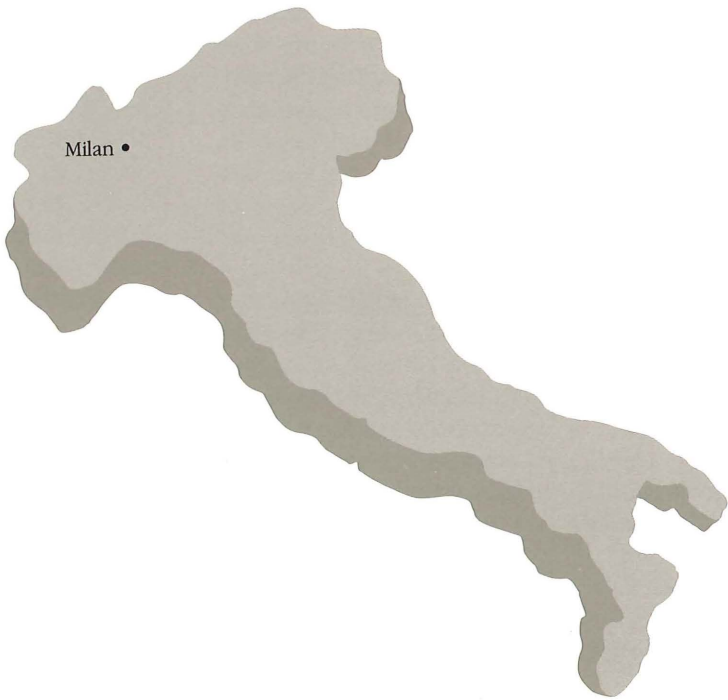
Italian colleagues what is unique about osteopathic medicine, but it may take a few more PCOM students working there before we make any converts. At least they now agree that we're not all orthopedic specialists."

Italian hospitality is legendary, and Cozza fully enjoyed it in Milan and with her long lost relatives in the village near Rome. "They fell in love with me," she says. "You can't believe how much affection Italians shower on relatives from America who come to visit them."

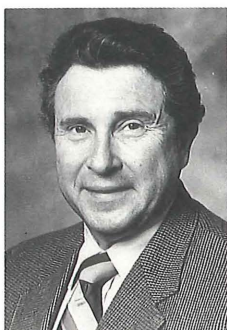
We can believe it.



I T A L Y



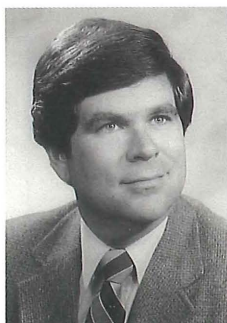




*Alvin D. Dubin*



*Samuel Strauss*



*Martin L. Lasky*

**1956**

**Alvin D. Dubin**, Cherry Hill, NJ, was elected vice president of the New Jersey Association of Osteopathic Physicians and Surgeons at their 86th annual convention at Atlantic City.

**1959**

**Ronald Goldberg**, Cherry Hill, NJ, has a general practice in the Winslow Professional Center and specializes in sports medicine, now seeing the children of fathers he once treated when they were young athletes in South Jersey.

**1963**

**Warren Wolfe**, Cherry Hill, NJ, was given the Physician Excellence Award by the medical staff of Kennedy Memorial Hospital, Cherry Hill Division, where he has practiced since 1965.

**1965**

**Martin L. Lasky**, York, PA, is vice president of medical affairs at Memorial Hospital, and has been voted president-elect of the Academy of Osteopathic Directors of Medical Education.

**1966**

**Merrill Jay Mirman**, Springfield, PA, recently lectured on

TMJ disorders at the national convention of the American Osteopathic Academy of Sclerotherapy, and is also president-elect of the academy.

**Michael J. Pisano**, Philadelphia, PA, has been in family practice in South Philadelphia for the past 20 years and is proud that his son, Michael J. Pisano III, is a member of the PCOM class of 1990.

**1971**

**Samuel Strauss**, San Antonio, TX, was chosen as the USAF Logistics Command Flight Surgeon of the Year, and is serving as chief of aerospace medicine at Kelly Air Force Base in Texas.

**1972**

**Joseph H. Stewart III**, Waynesboro, PA, has been elected to a three year term on the Waynesboro Hospital board of directors and is a member of the Waynesboro Family Medical Associates.

**1973**

**John M. Ferretti II**, Erie, PA, was appointed by Millcreek Community Hospital as medical director and chief executive officer of the corporation after serving three years as associate administrator of the facility.

**Herbert J. Rogove**, Columbus, OH, was recently elected chairman of the internal medicine section of The Society of Critical Care Medicine.

**1974**

**Charles T. Andrews**, York, PA, a staff radiologist at Memorial Hospital since 1978, was recently honored by the hospital for his term as medical staff president.

**1975**

**Gary A. Davis**, Cleveland, OH, diagnostic radiologist at the Cleveland Clinic, addressed a meeting sponsored by the Robbin' Red Breast Club, a support group for women who have had breast cancer.

**Joseph T. Palermo**, Seattle, WA, completed his first year in the Executive M.B.A. program at the University of Washington, and is chairman of the Washington State Osteopathic Board of Medicine in addition to clinical practice.

**1976**

**Lawrence J. Anastasi**, Margate, NJ, has announced the opening of his new office building named The Medical Center of Margate.

**Ted S. Eisenberg**, Philadelphia, PA, recently lectured to the Philadelphia Chapter of the COG Medical Fraternity on



breast reconstruction and other aspects of plastic surgery.

**Jerome E. Seeraty**, Yucca Valley, CA, has an active family practice and was elected chief of staff at High Desert Medical Center where he's a director of the Home Health Agency, and is also medical director of the Morongo Basic Hospice.

1977

**Geraldine P. Baird**, Philadelphia, PA was the keynote speaker at Northeastern Hospital's School of Nursing graduation held at St. Adalbert's church in Richmond.

**Carl G. DiJoseph**, Philadelphia, PA, a specialist in pulmonary medicine, recently joined the medical staff at Warminster General Hospital.

1978

**Robert M. Russo**, Allentown, PA, on the staff of Allentown Osteopathic Medical Center, has announced the formation of a family medicine practice with Salvatore C. Assorgi, DO.

**Edward Schreiber**, Blue Bell, PA, chairman of the department of emergency medicine at Suburban General Hospital in Norristown, has received certification from the American College of Osteopathic Emergency Physicians.

1979

**Drake P. DeHart**, York, PA, a staff member at Memorial Hospital since 1980, was recently honored by the hospital for his term as chairman of the medical staff executive committee.

**Samuel G. Joseph**, Kelly Air Force Base, TX, graduated from a fellowship program in pulmonary diseases at Walter Reed Army Medical Center, Washington, DC.

**Nelson P. Kopyt**, Allentown, PA, chief of nephrology at Allentown Osteopathic Medical Center, was recently board certified in the subspecialty of nephrology by the American Osteopathic Board of Internal Medicine.

**Glenn G. Miller**, Conshohocken, PA, a staff physician at Suburban General Hospital in Norristown, has been certified by the American Osteopathic Board of General Practice.

1980

**Stuart Kremer**, Conshohocken, PA, staff urologist at Suburban General Hospital in Norristown, recently spoke at the Plymouth Lions Club and a meeting sponsored by the Delaware Valley Society for Adolescent Health.

1981

**David I. Lubin**, McConnellsburg, PA, is the county's only general surgeon; after com-

pleting his residency, he returned to the Fulton County Medical Center where he had served a student rotation five years earlier.

**James T. McNelis**, Allentown, PA, is on the staff at Lehigh Valley Hospital Center, recently joined the internal medicine staff at Allentown Hospital, and is in private practice at the Allentown Medical Center.

**Kathryn M. Saponaro**, Lansdale, PA, has joined the medical staff of North Penn Hospital specializing in obstetrics and gynecology, and is also affiliated with the Lansdale Medical Group.

1982

**Cynthia A. Farrell**, Springfield Township, PA, has joined the medical staff of Warminster General Hospital where she specializes in psychiatry after doing her residency in rehabilitation medicine at Thomas Jefferson University.

**Jay N. Klazmer**, Marlton, NJ, was appointed to the independent health delivery staff, department of medicine, section of neurology, at the Garden State Hospital.

**Gary Panik**, Jim Thorpe, PA, has joined the staff of the Mauch Chunk Medical Center, a group of five family physicians providing pediatric and adult primary care.

**Linda E. Rosebberg**, Dolton, IL, a general practitioner on staff at Olympia Fields Osteopathic Medical Center, has been named a contributing editor to *Chicago Life* magazine and will write on a wide range of health care issues.

**Leonard F. Urbanski**, Tyrone, PA, has joined the staff at Altoona Hospital in the clinical service of internal medicine, and is in private practice at the Glendale Medical Center.

1983

**David P. Deysher**, Danville, PA, specializes in internal medicine and recently joined the Geisinger Medical Group in Lewistown, part of a large group practice with offices throughout central and north-eastern Pennsylvania.

**Robert A. Kimelheim**, Huntingdon Valley, PA, has been appointed to the staff of the Naval Medical Center, Newport, RI, in the department of internal medicine, with the rank of Lt. Cdr., Mc., USNR.

1984

**Deborah Bren**, Danielsville, PA, recently received board certification in general practice from the American College of General Practitioners in Osteopathic Medicine and Surgery.



**Diane Amalfitano**, Overbrook, PA, contributed an article entitled "The Osteopathic Thoracic-Lymphatic Pump" for the April-May issue of *The Journal of Osteopathic Medicine*.

**Patricia Enzman**, Orefield, PA, was recently certified in general practice by the American College of General Practitioners in Osteopathic Medicine and Surgery.

**Ruth E. Frye**, Emmaus, PA, joined the East Penn Family Practice Associates and recently received her board certification from the American College of General Practitioners in Osteopathic Medicine and Surgery.

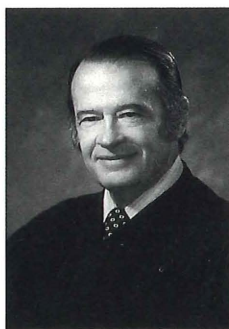
#### 1985

**Duane P. Dilling**, Southern Cove, PA, has joined a family practice partnership at the Southern Cove Medical Center after serving as chief physician at the Penn National Raceway and ER staff at Nason Hospital.

**Joseph Olekszyk**, Philadelphia, PA, a second year PCOM resident, received the Burroughs Welcome Research Fellowship Award for Otitis Media and Development of the Mastoid Air Cell System and will present a paper on his findings at the 1988 AOA convention.

#### 1986

**Mark S. Sickora**, Pittsburgh, PA, began a residency in internal medicine at Allegheny General Hospital after completing internship at Shenango Valley Medical Center, Farrell, PA.



*Chief Justice  
Samuel J. Roberts*

**Chief Justice Samuel J. Roberts**, Erie, PA, died on June 5 at the age of 80. He engaged in the active practice of law for more than 50 years in addition to a period of active duty in the U.S. Navy. Elected Justice of the Supreme Court of Pennsylvania in 1962, he was elevated to the office of Chief Justice in 1983. A dedicated member of the PCOM Board of Trustees for 13 years, Chief Justice Roberts contributed generously of his leadership, counsel, and administrative abilities. He gave his support to many civic, educational, and humanitarian boards and agencies in addition to numerous professional societies. In recognition of his legal and civic contributions, Chief Justice Roberts received manifold honors, awards, and honorary degrees, including an honorary doctor of laws degree from PCOM in 1972.

**Daniel H. Gifford**, '34, husband of Nellie S. Gifford, died in April in Banning, CA where he had been living during retirement.

**Herbert A. Laidman**, '37, husband of Mary Laidman, died on May 8, 1987 in Lakeville, CT, where he had been living during retirement.

**Theresa Louise Riddell**, '39, Jersey Shore, PA, died in June at the age of 75. Dr. Riddle was a member of the staff of Jersey Shore Hospital, and also a member of the American Academy of Osteopathy, the Osteopathic General Practitioner's Society, the Jersey Shore Historical Society, and the Williamsport Music Club.

**H. Jeffrey Tourigian**, '80, Cleveland, OH, died on June 3 at the age of 33 after a brief illness while in Cleveland Clinic Foundation where he was serving a residency in cardiothoracic surgery.



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**Coming Events**

September 13-19	National Osteopathic Medicine Week	PCOM
September 19	PCOM Parents-Students Reception	PCOM
September 27 - October 2	Assembly of American College of Osteopathic Internists	Scottsdale Mtn. Shadows
October 4-8	AOA Convention and Special PCOM Alumni Magic Kingdom Picnic Presentation	Orlando
October 11-14	AOHA Annual Convention AADME Meeting	Kansas City Hyatt Regency
October 17	PCOM 4th Annual Athletic Team Alumni Reunion	Fairmount Park
October 18-21	American Osteopathic Colleges of Anesthesiology and Radiology Annual Convention	Tucson Sheraton
October 18-21	60th Annual Clinical Assembly of Osteopathic Specialists	Honolulu Sheraton
October 21	OMCP Corporation Meeting	PCOM
January 22-23	Founder's Day Convocation and Dinner Dance	PCOM Adam's Mark Hotel
January 23	Alumni Assn. Board Meeting	PCOM
January 24-31	Post-Founder's Day CME	St. Thomas, USVI

**Walt Disney World®**  
VACATION KINGDOM

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October 5, 1987	Walt Disney World Contemporary Resort PCOM Cocktail Party/Reception	5 - 7 p.m.
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Mickey, Donald and friends welcome you and your family.

Further Information: Watch your mail or call Hale Peffall  
in the Alumni Office (215) 581-6522

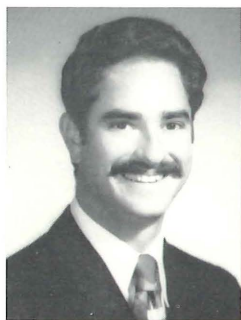
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# *Do You Remember...Where Are They Now?*

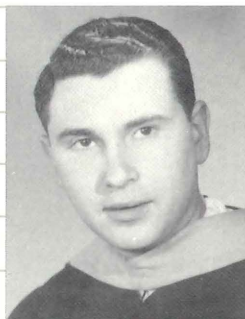
*(See Class Acts)*



*'71*



*'81*



*'56*

*'65*



## ***Osteopathic***

**Osteopathic Medical Center of Philadelphia**  
4150 City Avenue, Philadelphia, Pennsylvania 19131-1696